24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	
	C C00489799
Check if 24-hour report X 48-hour report New report Amends report filed	on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Alliance Fm	05 16 2014
Mailing Address 133 Industrial Avenue	Amount
City.	242.50
City State Zip Code Hasbrouck Heights NJ 07604	312.50 Transaction ID : B498438
	Date of Disbursement or Obligation
Purpose of Expenditure Printing of brochure Category/ Type 004	05 / 16 / 2014
Name of Federal Candidate Support Office	e Sought: House District:
Kay Hagan Oppose	President State: NC
Calendar Year-To-Date Per Election for Office Sought 39171.66 2014	
Full Name of Page	Other (specify)
Full Name of Payee FedEx	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 326 7th Avenue	03 10 2014
	Amount
City State Zip Code	21.04
New York NY 10001	Transaction ID : B498439
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Shipping of invitations for fundraiser Shipping of invitations for fundraiser Oategory Type 004	05 16 2014
Name of Federal Candidate Support Office	e Sought: House District:
Kay Hagan Oppose	President Senate State: NC
20174 00 201	ursement For: Primary X General
Per Election for Office Sought 391/1.66	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	333.54
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	4 4
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mount with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Aaron Samulcek [Electronically Filed] Date	06 13 2014
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Planned Parenthood Votes C C00489799 Check if 24-hour report	•
Planned Parenthood Votes C C00489799 Check if 24-hour report	₹ ▼
Check if 24-hour report	
PPCNC Action Fund Mailing Address PO Box 9194 Amount Amount	Y
Mailing Address PO Box 9194 Amount	
City State Zip Code 29.1	_
	6
Purpose of Expenditure Pestage of invitations for fundation Category/ Category/ Oo4	Y
Name of Federal Candidate Type 004 05 16 2014 Name of Federal Candidate Support Office Sought: House District:	_
Kay Hagan Oppose President State: NC	
Calendar Year-To-Date Per Election for Office Sought 39171.66 Disbursement For: Primary General Primary Other (specify) ▶	eral
Full Name of Payee Planned Parenthood Action Fund Date of Public Distribution/Dissemination 05 / 23 / 2014	
Mailing Address 434 West 33rd Street Amount 05 23 2014 Amount	_
City State Zip Code 5.42 New York NY 10001 Transaction ID : B498442	2
Purpose of Expenditure List rental and postage of letter to supporters Category/ Type O04 Date of Disbursement or Obligation O55 23 2014	Y
Name of Federal Candidate Support Office Sought: House District:	
Calendar Year-To-Date Per Election for Office Sought Oppose President Senate State: NO Disbursement For: 2014 2014 Primary Generally Generally Calendar Year-To-Date Per Election for Office Sought	
Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or conce with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a politic party committee) any political party committee or its agent.	
Aaron Samulcek [Electronically Filed] Date 06 13 2014 Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 4 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Planned Parenthood Votes	C C00489799	
Check if 24-hour report X 48-hour report New report Amends report	rt filed on	
Full Name of Payee	Date of Public Distribution/Dissemination	
PPCNC Action Fund	06 05 7 2014	
Mailing Address PO Box 9194	Amount	
City State Zip Code	1.32	
Chapel Hill NC 27515	Transaction ID: B498443 Date of Disbursement or Obligation	
Purpose of Expenditure List rental and postage of invitations for fundraiser Category/ Type 004	06 05 2014	
Name of Federal Candidate Support	Office Sought: House District:	
Kay Hagan Oppose	President Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought 39171.66	Disbursement For:	
Full Name of Payee	Date of Public Distribution/Dissemination	
Community Outreach Group LLC	06 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1110 Vermont Ave N.W.	Amount	
City State Zip Code	25852.22	
Washington DC 20005	Transaction ID : B498445 Date of Disbursement or Obligation	
Purpose of Expenditure Persuasion phone banks Category/ Type 004	06 12 / Y Y Y Y Y	
Name of Federal Candidate Support	Office Sought: House District:	
Kay Hagan Oppose	President Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought 39171.66	Disbursement For:	
(a) SUBTOTAL of Itemized Independent Expenditures	25853.54	
	7 7 7	
(b) SUBTOTAL of Unitemized Independent Expenditures	>	
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Aaron Samulcek [Electronically Filed] Date	06 13 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 4 OF 4 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	EC IDENTIFICATION NUMBER ▼	
Planned Parenthood Votes	C C00489799	
Check if 24-hour report X 48-hour report New report Amends report filed on	M / D = D / Y = Y = Y	
Full Name of Payee Date of I	Public Distribution/Dissemination	
PPHS-AF 06		
Mailing Address 100 South Boylan Ave. Amount		
City State Zip Code	12950.00	
Raleigh NC 27603 Transact	tion ID : B498446 Disbursement or Obligation	
Purpose of Expenditure Persuasion phone banks Category/ Type 004 06		
Name of Federal Candidate Support Office Sought:	House District:	
Kay Hagan Oppose President	Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought Disbursement F 2014 Other	For: Primary ⊠ General er (specify) ►	
Full Name of Payee Date of	Public Distribution/Dissemination	
Mailing Address		
Amount		
City State Zip Code	7	
	Disbursement or Obligation	
Purpose of Expenditure Category/ Type	M / D D / Y Y Y Y	
Name of Federal Candidate Support Office Sought:	House District:	
Oppose President	t Senate State:	
Calendar Year-To-Date Per Election for Office Sought Other	For: Primary General er (specify) ▶	
Cuie	er (specify) P	
(a) SUBTOTAL of Itemized Independent Expenditures	12950.00	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7	
(c) TOTAL Independent Expenditures	39171.66	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
[Electronically Filed] Date 06	13 2014	
Signature		